

## STATE OF CONNECTICUT TEACHERS' RETIREMENT BOARD CRAND STREET HARTEORD CT 06106 15

21 GRAND STREET HARTFORD, CT 06106-1500
Toll free 1-800-504-1102 (860) 241-8426 Fax (860) 525-6018 <u>www.ct.gov/trb</u>

## **DISTRIBUTION OF INELIGIBLE FUNDS**

Ineligible funds are those which have been erroneously submitted to the Teachers' Retirement Board, or have been submitted on behalf of individuals who are not eligible for membership (such as those not holding appropriate Connecticut certification).

Applicant's Name Last	First	nitial	Home Phone
Street Address	City	State	Zip Code
Social Security Number	CTRB Mer	mbership #	Maiden Name (if applicable)
Check one election:			
I elect to have Connecticut Teachers' Retirement Board roll over the taxable portion of the refund directly to the Qualified Plan indicated below.			
I elect to have Connecticut Teachers' Retirement Board issue the refund of the account(s) directly to me. I understand that there will be an automatic 20% withholding for Federal Tax purposes.			
I want Connecticut STATE INCOME TAX withheld in the amount of \$			
You may choose NOT to have Connecticut withholding, but by doing so, you are not relieved of any tax liability which may be due. <b>CTRB can only withhold State taxes for the State of Connecticut.</b> Questions concerning this distribution should be referred to the Connecticut Department of Revenue Services at (860) 297-5962.			
Applicant's Signature			Date
NOTIFICATION OF INTENT TO TRANSFER TAXABLE BALANCE TO QUALIFIED PLAN			
This is notification of my intent to transfer the taxable portion of my account balances held by Connecticut Teachers' Retirement Board.			
The sums, which are being distributed under the provisions of the Connecticut Teachers' Retirement Board, are considered a qualified plan under section 401(a) of the Internal Revenue Service Code. Please issue a check representing the taxable portion of my distribution to my account as follows:			
Name of Custodian/Trus	stee		Account Number
Street Address	City	State	Zip Code
ACCEPTANCE OF CUSTODIAN/TRUSTEE			
On behalf of the above-designated Custodian/Trustee, we will accept this money as a tax-free exchange under Section 402 of the Internal Revenue Code.			
Authorized Representative Signa	ture		Date